

APPLICATION DATA SHEET

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Title::	Method of Bone Expansion and Compression for for Receiving a Dental Implant Using Threaded Expanders.
Attorney Docket Number::	1065.43
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	Fig. 1
Total Drawing Sheets::	1
Small Entity::	Yes
Petition Included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Inventor One Given Name::	Patricio
Middle Name::	
Family Name::	Nilo
City of Residence::	Pembroke Pines
State or Province of Residence::	Florida
Country of Residence::	USA
Street of Mailing Address::	15922 NW 14 th Place
City of Mailing Address::	Pembroke Pines
State or Province of Mailing Address::	FL
Postal or Zip Code of Mailing Address::	33028

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Inventor Two Given Name:: Bruce
Middle Name:: L.
Family Name:: Hollander
City of Residence:: Boca Raton
State or Province of Residence:: Florida
Country of Residence:: USA
Street of Mailing Address:: 10563 Boca Woods Lane
City of Mailing Address:: : Boca Raton
State or Province of Mailing Address:: FL
Postal or Zip Code of Mailing Address:: 33428

Correspondence Information

Name:: MELVIN K. SILVERMAN & ASSOC.,P.C.
Street of Mailing Address:: 500 WEST CYPRESS CREEK ROAD
SUITE 500
City of Mailing Address:: FORT LAUDERDALE
State or Province of Mailing Address:: FL
Postal or Zip Code of Mailing Address:: 33309
Telephone:: (954) 351-7474
Fax:: (954) 492-0087

Representative Information

Registration Number::	26,234	Name::	Melvin K. Silverman
Registration Number::	44,211	Name::	Yi Li

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Name::